NOTIFICATION OF MULTICANDIDATE STATUS

PAGE 1/1

(Revised 1/2001)

s form shou	ide for instructions) Ild be filed after the Committee q	ualifies as a multicai	ndidate committee.	RECÈI	VEB	TAGE 17:1
(a) NAME OF (COMMITTEE IN FULL	······································	Ė	P MAIL	CENTE	Ť
DEMO	CRATIC SOCIALISTS (OF AMERICA , I	INC PAC 2019	DEC 16	PM 12: 3	33
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(c) City, State a	nd ZIP Code			3. TYPE OF		(check one)
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ertify that	one of the following situati	ons is correct (co	omplete line 4 or 5):			
STATU on affiliatio		•	itted its Statement of lified as a multicandi	_	•	•
Commi	ttee Name:					
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STATU	S BY QUALIFICATION:	•				•
	Name		Office Sought	State/E	District	Date
· (i)	SANDERS, BERNARD, , ,		Senate	VT	00	07/11/2003
(ii)	OWENS, CHRIS,		House	NY	11	05/18/2006
(iii)	TASINI, JONATHAN, , ,		Senate	NY	00 -	06/05/2006
(iv)	LAMONT, EDWARD M, ,		Senate	СТ		06/25/2006
(v)	DAVIS, DANNY K, , ,		House	IL ·	07	07/25/2006
on (c) Re	egistration: The committed bmitted on: 12/12/2019	e has been regist	tered for at least 6 m			1 was
	·					<u> </u>
ertify that I have examined this Statement and to the best of my knowled PE OR PRINT NAME OF TREASURER art, Mana, , Svart, Maria, .				ct and complet	DATE	
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